



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Brian Leyland-Jones

Application No.: 60/287,996

Group: 1641

Filed: February 28, 2002

For: USE OF METABOLIC PHENOTYPING IN INDIVIDUALIZED
TREATMENT WITH AMONAFIDE

RECEIVED

NOV 06 2002

TECH CENTER 1600/2900

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>10/28/02</u>	<u>Kelley A. Farr</u>
Date	Signature
<u>Kelley A. Farr</u>	
Typed or printed name of person signing certificate	

TRANSMITTAL OF FORMAL DRAWINGS

Assistant Commissioner for Patents
P.O. Box 2327
Arlington, VA 22202

Sir:

Transmitted herewith are formal drawings consisting of 29 sheets, Figures 1 through 30, for filing in the subject patent application.

Figure 25 is a black and white photograph.

Figure 29 has been added. Originally filed Figure 29 has been renumbered Figure 30. Support for the added figure is in the provisional application 60/271,714, the entire teachings of which are incorporated into the present application by reference. No new matter has been added. A Preliminary Amendment is being filed concurrently herewith.

Acceptance of the formal drawings is respectfully requested.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Deirdre E. Sanders

Deirdre E. Sanders

Registration No. 42,122

Telephone: (978) 341-0036

Facsimile: (978) 341-0136

Concord, MA 01742-9133

Date: October 28, 2002



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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TECH CENTER 1600/2900

Applicant: Brian Leyland-Jones

Application No.: 10/087,996

Group: 1641

Filed: February 28, 2002

Examiner: Not Yet Assigned

For: Use of Metabolic Phenotyping In Individualized Treatment With Amonafide

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Date	Signature
<u>Kelley A. Farr</u>	
Typed or printed name of person signing certificate	

TRANSMITTAL OF POWER OF ATTORNEY DOCUMENT AND
STATEMENT UNDER 37 C.F.R. § 3.73 (b)

Assistant Commissioner for Patents
P.O. Box 2327
Arlington, VA 22202

Sir:

Please find enclosed herewith an executed Power of Attorney document and executed Statement Under 37 C.F.R. § 3.73(b) for filing in the captioned application.

Please charge any fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

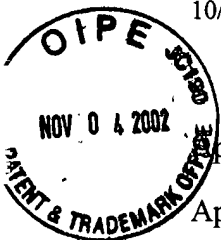
Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Deirdre E. Sanders
Deirdre E. Sanders
Registration No.: 42,122
Telephone: (978) 341-0036
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Concord, MA 01742-9133
Date: October 28, 2002

1641



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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TECH CENTER 1600/2900

Applicants: Brian Leyland-Jones

Application No.: 10/087,996

Group: 1641

Filed: February 28, 2002

For: USE OF METABOLIC PHENOTYPING IN INDIVIDUALIZED
TREATMENT WITH AMONAFIDE

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>10/08/02</u>	<u>Kelley A. Farr</u>
Date	Signature
<u>Kelley A. Farr</u>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents

P.O. Box 2327

Arlington, VA 22202

Sir:

Transmitted herewith is Preliminary Amendment for filing in the above-identified application.

[] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)	(COL. 4)	(COL. 5)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	88	MINUS	* 88	0
INDEP	8	MINUS	** 8	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

* not fewer than 20
** not fewer than 3

SMALL ENTITY	
RATE	ADDIT. FEE
X \$9	\$
X \$42	\$
+ \$140	\$

TOTAL = \$ 0

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$
X \$84	\$
+ \$280	\$

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
		\$	_____
		\$	_____
		TOTAL:	\$ <u>0</u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
		\$	_____
		\$	_____
		TOTAL:	\$ <u>0</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Deirdre E. Sanders

Deirdre E. Sanders

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Telephone (978) 341-0036

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Concord, Massachusetts 01742-9133

Dated: October 28, 2002